Exhibit 11

		Page 1
1 2 3	UNITED STATES DISTRICT COURT DISTRICT OF MASSACHUSETTS DOCKET NO. 1:13-MD-2419 (RWZ) IN RE: NEW ENGLAND COMPOUNDING PHARMACY, INC. PRODUCTS	
4 5	LIABILITY LITIGATION	
6	THIS DOCUMENT RELATES TO:	
7	ARMETTA, ET AL. V. BOX HILL SURGERY CENTER, LLC, ET AL. NO. 1:14-CV-14022-RWZ	
8		
9	BOWMAN, ET AL. V. BOX HILL SURGERY CENTER, LLC, ET AL. NO. 1:14-CV-14028-RWZ	
10		
11	DAVIS, ET AL. V. BOX HILL SURGERY CENTER, LLC, ET AL. NO. 1:14-CV-14033-RWZ	
12		
13	DREISCH, ET AL. V. BOX HILL SURGERY CENTER, LLC, ET AL. NO. 1:14-CV-14029-RWZ	
14	FARTHING, ET AL. V. BOX HILL SURGERY CENTER,	
15	LLC, ET AL. NO. 1:14-CV-14036-RWZ	
16	KASHI, ET AL. V. BOX HILL SURGERY CENTER,	
17	LLC, ET AL. NO. 1:14-CV-14026-RWZ	
18		
19	TORBECK, ET AL. BOX HILL SURGERY CENTER, LLC, ET AL. NO. 1:14-CV-14023-RWZ	
20		
21	HANDY, ET AL. V. BOX HILL SURGERY CENTER, LLC, ET AL. NO. 1:14-CV-14019-RWZ	
22 23 24	DEPONENT: LAXMAIAH MANCHIKANTI, M.D.	
25	DATE: FEBRUARY 16, 2017 REPORTER: CHELSEA SEVILLA-LOZADA	

Day 2	Davis	
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3 ON BEHALF OF THE PLAINTIFFS:	2 Page 3 DIRECT EXAMINATION BY MR. MILLER 6	
4 JAY D. MILLER	4 EXAMINATION BY MR. ROTH 113	
5 SILVIO TRENTALANGE	5 CROSS EXAMINATION BY MR. KIRBY 177	
6 LAW OFFICES OF PETER G. ANGELOS, P.C.	6 REEXAMINATION BY MR. ROTH 192	
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11	11 34 FDA BRIEFING 62	
12 AND	12 36 ASSESSMENT OF INFECTION CONTROL 1	
13	13	
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24	24	
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1 APPEARANCES (CONTINUED)	1 STIPULATION	
2	2	
3 ON BEHALF OF THE DEFENDANT, BOX HILL SURGERY CENTER:	3 The deposition of LAXMAIAH MANCHIKANTI, M.D. taken at	
4 GREGORY K. KIRBY	4 THE PAIN CENTER, 2831 LONE OAK ROAD, PADUCAH, KENTUCKY	
5 PESSIN KATZ LAW, P.A.	5 42003 on THURSDAY, the 16TH day of FEBRUARY, 2017 at	
6 901 DULANEY VALLEY ROAD, SUITE 500	6 approximately 10:00 A.M. CST; said deposition was taken	
7 TOWSON, MARYLAND 21204	7 pursuant to the FEDERAL Rules of Civil Procedure, It is	
8 TELEPHONE NO.: (410) 938-8800	8 agreed that CHELSEA SEVILLA-LOZADA, being a Notary	
9 E-MAIL: GKIRBY@PKLAW.COM	9 Public and Court Reporter for the State of Kentucky, may	
10	10 swear the witness.	
11 ON BEHALF OF THE DEFENDANT, SPECIALTY SURGERY CENTER:	11	
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22	22	
22 23	22 23	
22	22	

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1 around, so...

7

- Q Okay. So let me -- I take it, then, you would
- 3 disagree with this statement. A physician cannot
- 4 prescribe a non-FDA approved medication without a
- 5 specific reason for an individual patient? You disagree
- 6 with that, don't you?
 - MR. KIRBY: Objection to form. Asked and
- 8 answered a long time ago. Go ahead.
- 9 A Again, I think you may have changed the
- 10 question somewhere there. Without a specific reason, I
- 11 didn't say that. There should be a specific reason.
- 12 Specific reason is putting that in the epidural space to
- 13 manage whatever the problem they have, spinal pain in
- 14 this case for epidural injection, so that is a specific
- 15 reason for that specific patient.
- 16 Q Okay. So you agree that before you're going
- 17 to use a non-FDA-approved drug, you have to have a
- 18 specific reason, or a specific patient?
- 19 MR, KIRBY: Objection to form. You asked the
- 20 same question an hour ago. But, go ahead if you can
- 21 answer it again,
- 22 A Well you need a reason to order a drug for
- 23 anyone whether it is an FDA drug, or FDA-approved drug,
- 24 or non-FDA-approved drug, or any drug, there should be a
- 25 specific reason to do so,

1 BY MR. MILLER:

- Q And is that why there's a regulation requiring
- 3 individual prescriptions for each individual patient?
- MR. KIRBY: Objection to form.
- A Again, I'm not quite certain if that
- 6 regulation applies to physicians. I'm not even sure it
- 7 is a regulation. As I said, we do not see any policies
- 8 or regulations from Boards of Medical Licensure, and
- 9 from DEA. The prescription regulations, all of them
- 10 come from DEA. If DEA makes the recommendations, it
- 11 gives black box warnings, things like that, but how you
- 12 do the prescriptions comes from DEA.
- 13 Q Do you recall in your report saying that
- 14 because Dr. Bhambhani had no prior problems with NECC,
- 15 she was free to continue to order from them without
- 16 conducting any research?
- 17 A Yes, I have said that on multiple occasions
- 18 during this testimony. That's true.
- 19 Q Is it reasonable to expect Dr. Bhambhani to at
- 20 least conduct a Google search on NECC prior to using it?
- 21 MR. KIRBY: Objection to form, foundation, You
- 22 can answer.
- 23 A Not necessarily. She already was experienced
- 24 with this. She could have done that before she started
- 25 in 2003, I guess you can make a case about that, but she

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- 1 already developed significant experience with it, and 2 she had bad experience with other ones, so what she was
- 3 doing was the right thing, so -- and that is the
- 4 standard of care. That is what all the physicians do.
- O I thought I had asked you whether or not it
- 6 was reasonable for her to at least have conducted a
- 7 Google search.
- A Well, that's, again, a hypothetical question.
- 9 Anybody can conduct a Google search, or may not conduct
- 10 a Google search, and there is no guarantee that you will
- 11 find anything, and the Google search would be in 2003,
- 12 because that is when she started using it. Google
- 13 searches were not that great in 2003,
 - Q Well, when she went out on her own, would you
- 15 have expected it to be reasonable that she, well, let me
- 16 make sure that NECC is still a reliable safe compounder.
- 17 How long did it take to hit a search button on the
- 18 computer?
- MR. KIRBY: Objection to form, foundation. Go 19
- 20 ahead.
- 21 A Well, how long it takes to hit such a button
- 22 depends on each person's typing skills and searching
- 23 skills, but, again, she can't sit down there and Google
- 24 search each drug she is using. She is using sodium
- 25 chloride solution. She is using several other drugs.

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- 1 So if she has to look for each and every drug, there was
- 2 no reason for it. If there were any complaints came to
- 3 her notice, she was aware of anything, then it would
- 4 have been reasonable for her or her -- whoever she
- 5 appointed to look into that. But there was no reason to
- 6 do that. She already began very comfortable, and that
- 7 is what the majority of the doctors do with the new
- 8 practices they start their own practices, they do that.
- 9 The doctors who left from our surgery center here, they
- 10 do the same thing. They took materials from here, they
- 11 took questionnaires, informed consents, and everything,
- 12 and they start following them, and they're not doing
- 13 independent searches,
- 14 Had you seen the FDA warning letter of 2006, Q
- 15 NECC?
- 16 A I have seen it now, but not before 2012.
- Q Do you know if Dr. Bhambhani had done a search 17
- 18 in 2007?
- 19 No. She has not done any searches in 2007.
- 20 Q If she had never done a search, but if she had
- 21 done one, you don't know whether or not that letter
- 22 would've showed up, right?
- 23 MR. KIRBY: Objection to form, foundation,
- 24 calls for speculation. Go ahead.
 - A Well, hypothetically, if she sat down there

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Page 102 Page 104 1 this objection. 1 just talking about, at the very end reinforces the 2 MR, KIRBY: Okay, Thank you, I'll call him 2 propriety of Box Hill's due diligence prior to 3 3 purchasing from NECC, back in. By the way, while he's out, what's the --4 how much longer do you think you have, Jay, because A Which one is that? 5 I know then Harry probably has some questions, too. 5 MR. KIRBY: What's the question? 6 A What page are we talking about? MR. MILLER: I've got to stop probably at 6 7 Q Page 8, the same paragraph we were just around quarter of 3:00. 8 MR. MILLER: Meaning the deposition has to be 8 talking about, the very last line of that paragraph. 9 A Oh, okay. done by then? 9 10 MR, MILLER: No. I'm going to -- I'll let --10 Q Reinforces the propriety of Box Hill's due 11 I'll stop questioning, Glenn will take over and let 11 diligence prior to purchasing from NECC. Due -- what 12 Harry do his questioning, but we'll be done our part 12 due diligence did Dr. Bhambhani exercise? 13 by quarter of 3:00. 13 MR. KIRBY: Objection to form, foundation, and 14 MR. KIRBY: Okay. Harry, do you think -- do 14 the commentary before the question. 15 15 A Well, if you are reading -- if I'm reading you think with your questioning, I don't know how 16 much you have, that we could be done by 4:30? Wait, 16 that sentence that is related to your question, there 17 wait, wait. So we're on -- we're in separate time -17 were no guidelines from any major medical associations, 18 that is true, there were no guidelines for her to do a 18 - this can be off the record, by the way. 19 (OFF THE RECORD) 19 due diligence, or for -- by her surgery center prior to 20 BY MR. MILLER: 20 purchasing medication compounded such as NECC. 21 Q Doctor, I want to clarify this paragraph that 21 Q My question is what due diligence did Dr. 22 begins "If or when she obtained materials from NECC, she 22 Bhambhani do? She did nothing, right? 23 saw or would have seen representations by NECC," and 23 MR. KIRBY: Objection. Asked and answered. 24 then there's about seven lines of different A Well, her own experience is the due diligence 24 25 representations. Isn't it true that you now know that 25 to a great extent. Then she did not do any additional Page 105 Page 103 1 due diligence and that is what we are saying. I am 1 Dr. Bhambhani didn't see any representations from NECC, 2 correct? 2 saying, that there are no guidelines to do such thing, 3 A That's correct. 3 for example, we did not do any due diligence either Q So his opinion, then, really isn't applicable 4 afterwards, or before, so that is the standard practice 5 anymore. I mean, there was no reassurance from any 5 among surgery centers, and offices, and by physician 6 representation, because we know she didn't get any, 6 practices. 7 correct? Q So if we take away her prior employment 8 MR, KIRBY: Objection to form. 8 experience, I want you to assume hypothetically that Dr. 9 Yes. That's correct, she has not seen any of 9 Bhambhani started practice on her own in 2007, has never 10 this. 10 heard of NECC, and says "I've got to purchase a 11 Q Okay. Is your opinion that Dr. Bhambhani had 11 compounded drug," opens a phone book up and picks NECC, 12 no inclination to do any investigation, however limited, 12 do your testimony and your opinions that's all she's 13 of NECC prior to using them at Box Hill based in part 13 required to do, if they're a licensed compounding 14 because she had had this prior experience with NECC at 14 pharmacy, she's met the standard of care? 15 her prior employer? 15 MR. KIRBY: Objection to form, foundation, the 16 MR. KIRBY: Objection to form. You can answer. 16 hypothetical nature, and facts not in evidence. You 17 A Well, not in part. She had the prior 17 18 experience of her own, and that doesn't have anything to 18 A Well, as you said, it is completely 19 do with the prior employer. The prior employer was the 19 hypothetical, but if that situation arises, if she opens 20 one who initiated -- in any case, she was practicing on 20 the telephone book, she will not find NECC there. The 21 her own, whether she was employed by someone else or 21 way she will find where to get these drugs is, again, 22 that -- that suffices to make orders from the same 22 she has to go back to her previous employer or where she 23 entity where you are getting them from. That is 23 was trained, or a senior or a friend, or somebody else 24 satisfactory. That is standard of practice. 24 and find out about the information, and then if she is 25 Well, continuing with that propriety we were 25 not satisfied with that information, then she may check